### **Application Process:**

- 1. Contact James City County Parks Division at 757-259-5360 to request an Instructional Class Park Use Permit Application packet or download an application at <a href="https://www.jamescitycountyva.gov/recreation">www.jamescitycountyva.gov/recreation</a>.
- 2. A completed application must be submitted along with a \$25 non-refundable application fee, no later than 30 days prior to the start of the proposed first class date. The following items are also required to be submitted with the application:
  - A Certificate of Insurance indemnifying James City County, Virginia, in the amount of \$1,000,000 against liability in case of injury.
  - Proof of Business: A copy of the applicant's business license that is on file with the James City County Commissioner of Revenue's office shall be included with the permit application.
  - Signed Certification of Compliance form with Background Checks for programs serving youth under the age of 18 or vulnerable populations.
  - A copy of any relevant certifications (AED, CPR, first aid, WSI; personal training ACSM, ACR, NASM, NSCA; group fitness AFFA, NETA or ACE)
- 3. Once the review by appropriate Parks and Recreation staff is completed, the application will be approved, denied or, if required, sent back to the applicant for additional information.
- 4. Once the application is approved in final form, the remaining fees will be submitted by the applicant and processed by the Parks Division.
- 5. The approved permit will be issued to the applicant no later than five working days after the final payment has been processed.
- 6. A Hold Harmless Agreement signed by each class participant is due to James City County prior to the start of the first class.

Certain James City County parks are available to host a variety of instructional services and programs. The provisions of chapter 16 of the County Code authorize the Director of Parks and Recreation to develop and administer County policies, procedures, rules and regulations governing the use of outdoor recreation facilities.

In addition to providing such authorization, the Instructional Class Park Use Permit process will ensure that the program or service is held at an appropriate park location, does not conflict with other scheduled activities, that the County, class offerors and participants are properly insured and the program/service is coordinated effectively with James City County staff.

# **Applicability:**

Any individual and/or business that is interested in using a designated James City County park as a location for the delivery of an instructional program or service is required to obtain an Instructional Class Park Use Permit.

Examples of instructional services or programs that would be required to obtain such a permit include, but are not limited to, fitness boot camps, exercise classes, personal training, organized camps, sports instruction and instructional classes/workshops.

#### **Conditions:**

- 1. Permit requests shall be submitted no later than 30 days before the desired starting date of the program/service.
- 2. Permits are effective from the date of approval on a quarterly period. Permits are non-transferable and non-refundable.
- 3. A copy of the permit shall be carried by the person in charge of the service or program while at the park.
- 4. Programs and services must be held during regular park operating hours unless otherwise permitted.
- 5. Use of equipment that could damage park grounds, park amenities or pose a hazard to the general public is prohibited.
- 6. Assigned use of park areas are non-exclusive and in an "as-is" condition. No additional services such as electricity, water, portable restrooms, etc. will be provided. No tents, canopies, stakes, posts, signs or any other items may be used without prior permission from James City County Parks and Recreation.
- 7. No fees for the program and/or service shall be collected at the park site. Selling of food, beverages, merchandise or any other items are prohibited.
- 8. Violations of the permit conditions or any James City County Codes may result in the revocation of the permit on a temporary or permanent basis.
- 9. Any changes to the permitted program or service shall be communicated to the approving entity within James City County Parks and Recreation.
- 10. James City County Parks and Recreation reserves the right to limit the number of Instructional Class Park Use Permits issued annually.

#### Fees:

Non-Refundable Application Fee (applies per three month/quarterly permit requests) \$25

Three-Month Permit (two days per week, Monday–Friday, two hours per day) \$250 per park

Three-Month Permit (3-5 days per week, Monday–Friday, two hours per day) \$500 per park

#### **Extra Fees:**

Saturday or Sunday (peak time) Additional \$50 to Three-Month Permit Fee

26-50 Participants Additional \$50 to Three-Month Permit Fee

51-75 Participants Additional \$100 to Three-Month Permit Fee

# **CLASSES OVER 75 PARTICIPANTS WILL NOT BE PERMITTED AT ANY PARK LOCATION**

Check Box	Park	Address	Dates	2 Days Mon-Fri	3-5 Days Mon-Fri	Sat	Sun
	Mid County Park (open field areas)	3793 Ironbound Road					
	Jamestown Beach Event Park (beachfront or open field areas)	2205 Jamestown Road					
	Freedom Park (open field areas)	5537 Centerville Road					
	Chickahominy Riverfront Park (open field area)	1350 John Tyler Highway					
	Upper County Park (open field areas)	180 Leisure Road					

Use of other Park amenities for instruction i.e. athletic field, sport court, etc., shall follow standard rental fees and policies for the park requested.

## **Requirements:**

- 1. A Certificate of Insurance indemnifying James City County, Virginia, in the amount of \$1,000,000 against liability in case of injury.
- 2. A Hold Harmless Agreement signed by each class participant.
- 3. Proof of Business: A copy of the applicant's business license that is on file with the James City County Commissioner of Revenue's office shall be included with the permit application.
- 4. Signed Certification of Compliance form with Background Checks for programs serving youth under the age of 18 or vulnerable populations.
- 5. Copy of any relevant certifications (AED, CPR, first aid, WSI; personal training ACSM, ACR, NASM, NSCA; group fitness AFFA, NETA or ACE).



# **Instructional Class Park Use Permit**

Applicant/Business Name:	Date:						
Address:	City:	State:	Zip:				
Day Phone:	Evening Phone:	Fax:					
Email Address:							
n-Site Instructor Name: Instructor Cell Phone:							
Site Requested:	equested: Specific Area of Site Requested:						
Class Name:							
Type of Class:							
Class Starting Date:	Class End	Date:					
Day(s) of the Week Class is Held:							
Class Start/End Times:							
Estimated Attendance Per Class:	Clas	ss Fee:					
Brief Description of Class:							
Use/Set up of Equipment Requested:							
Class Website:							
By signing below, I agree to abide by the	Instructional Class Permit cond	itions.					
Signature:	Date:						

# CERTIFICTION OF COMPLIANCE WITH BACKGROUND INVESTIGATION

I,	_, a	•	authorized					
(Contractor name) has performed the	necessar	y back	ground inve	stigation pur	suant to	Sect	tion 8 o	f the
Independent Contractor Agreement for								
(Contractor name) dated		,	and in accord	lance with §1	.9.2-392	.02 o	f the Co	de of
Virginia, 1950, as amended.								
I further certify that all adult employ								
providing services to	ur	nder the	e above refer	enced contrac	et have <b>n</b>	iot be	een conv	icted
of, or are currently under indictment for								
violent or sexual within the past 10 year							_	
offense in the past 5 years or multiple of					other mi	sdem	neanor w	ithin'
5 years considered a potential danger t	o childre	n, the e	elderly or the	disabled.				
I understand that the County may reque	est further	r docur	mentation of	completion o	f this re	quire	ment.	
I understand that I am required to upda	te this cer	rtificati	on if I become	ne aware of a	ı change	d circ	cumstan	ce.
I further understand that pursuant to Vi	irginia Co	ode §§	63.2-1606 an	d 63.2-1509,	I am a	mand	lated rep	ortei
of suspected abuse, neglect or exploitat	-						•	
I do understand the above information	and certif	fy that	the above sta	tements are t	rue.			
(Contractor's Authorized Officer)								
Printed Name								
Title								
Date								